

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 6 OF 9
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) NATIONAL RIGHT TO LIFE VICTORY FUND		FEC IDENTIFICATION NUMBER ▼ C C00509893
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Interactive Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2022
Mailing Address PO Box 92521		Amount 57000.00
City Washington	State DC	Zip Code 20090
Purpose of Expenditure IE-Walker-Media Buy-PREPAY 10/13/22	Category/Type 004	Transaction ID : SE.70788 Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2022
Name of Federal Candidate WALKER, HERSCHEL MR., , ,		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 166310.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Interactive Media LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 01 / 2022
Mailing Address PO Box 92521		Amount 48420.00
City Washington	State DC	Zip Code 20090
Purpose of Expenditure IE-Laxalt-Media Buy-PREPAY 10/13/22	Category/Type 004	Transaction ID : SE.70789 Date of Disbursement or Obligation MM / DD / YYYY 11 / 01 / 2022
Name of Federal Candidate LAXALT, ADAM, , ,		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 103832.59		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	105420.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Cockfield, Wayne, , ,**[Electronically Filed]*

Date

MM / DD / YYYY
11 / 02 / 2022

Signature